

**2017 SOCIAL AND VOLUNTARY SERVICES COMMISSION
FUNDING REQUEST**

The City of Norman Social and Voluntary Services Commission is anticipating the approval of approximately \$175,000 of funding in the 2017-2018 City of Norman Budget that will be available July 1, 2017 to be awarded to eligible 501(c)(3) organizations in Norman. To be considered for funding please submit one original Funding Request no later than 5:00pm on June 2, 2017 to the City of Norman CDBG Grants Office located at 201-A West Gray. No email applications will be accepted. Do not include any other information, such as brochures, application forms, etc. A mandatory presentation before the City of Norman Social and Voluntary Services Commission is scheduled for Monday, June 19, 2017 at 6:00pm in the City Council Chambers located at 201 West Gray. Any agency without a representative present to make a presentation regarding the application will not be considered for funding.

Legal Name of Agency: _____

Mailing Address: _____

Application completed by: _____

Telephone Number: _____

Email Address: _____

Amount of Funding Request: _____

*****Please note that agency project funding will be on a reimbursement basis. Payment will be made as invoices with appropriate documentation are provided. All expenditures must be made during the time frame of July 1, 2017 and June 15, 2018 to be reimbursed.**

In what year was your Agency incorporated: _____

Are you associated with a national organization: _____

Number of volunteers: _____

How many hours do volunteers donate: _____

How much money do volunteers save the agency: _____

How are volunteers utilized: _____

Has your Agency applied for SVSC funds before? _____

Year _____ Amount _____ Purpose _____

Year _____ Amount _____ Purpose _____

Year _____ Amount _____ Purpose _____

Financial Information from the last fiscal year:

Percent of the budget which was spent on fund-raising: _____

Percent of budget spent on programs: _____

Percent of budget spent on administrative expenses: _____

Percentage of Organizational funding:

Religious Organizations		Government Grants	
Civic Clubs		Government Contracts	
Corporate Donors		Individual Donors	
Endowment/Interest Income		Private Foundations	
Fees for services/products		United Way	
Special Events (based on net earnings)		Other	

Overall Mission of Agency

Please provide a one page narrative in 10 or 12 point type that includes:

- The Mission Statement of your agency and describe how the Mission has evolved over time. Discuss the current status of your agency and whether any reduction/expansion of services, capital campaign, etc. is being considered.
- List the client population (income, age, geographic location – percentage of City of Norman residents) and briefly describe all programs and services offered currently by your agency. Include any duplication of services in our area and the percentage increase or decrease projected in staff numbers over previous year.

Specific project for which funding is being requested

Please provide a one page narrative in 10 or 12 point type that includes:

- Describing the specific program, project, activity, or equipment for which funds are requested.
- Explain how the SVSC funds will be utilized and how the specific program, project, activity, or equipment fits within the Mission of your agency.
- Provide staff positions, salaries, equipment, office supplies, etc. that will be utilized for the requested program whether or not being funded by SVSC.
- Please address what similar services are available through other local agencies, why this program is unique, how many will benefit and why it would be appropriate for City of Norman funds to be used to support this program.

Financial Information

Please provide a description of internal financial evaluation procedures, control processes and performance review procedure including the percentage increase or decrease of total budget over previous fiscal year budget. Attach previous year budget summary and projected budget to include in kind contributions and budget assumptions. In addition003A

- If the total annual operating budget is \$250,000 or more, the organization must submit a 990 tax form and an audit prepared annually by an independent CPA firm that is within 18 months prior to January of the application year.
- If the organization has a total annual operating budget of \$100,000 - \$250,000, it must submit a 990 tax form and a CPA Review.
- If the organization has a total annual operating budget of less than \$100,000, it must submit a 990 tax form, three years of financial statements signed by the Board Treasurer, and a list of assets.

Identification of Gaps

The Social and Voluntary Services Commission is charged with advising the City Council regarding the coordination and cooperation among various social and voluntary services and to promote positive links between service deliveries. To assist in evaluation of the services being provided within our community and to help identify gaps in these services, please provide maximum one page narrative in 10 or 12 point type answering the following questions:

1. What gaps in Norman/Cleveland County social services are affecting the clients you serve?
2. How is your agency addressing these gaps, internally or in collaboration with other agencies? Identify further assistance/collaboration your agency needs to increase the success of these attempts.
3. Are there strategies, other than increases in funding, that you recommend addressing the gaps?

Required Attachments to this application:

One Page Narrative describing Overall Mission of Agency

One Page Narrative describing Specific Project for which Funding is being requested

One Page Narrative pertaining to Gaps

Financial Information as outlined

Budget summary and projected budget for funding being requested

Copy of IRS tax exempt status letter or your application for tax exempt status

List of current board members including names and professions

List of current staff members and their position titles and assigned duties